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Bib Data Sheet

CONFIRMATION NO. 4305

SERIAL NUMBER 10/028,944	FILING DATE 12/21/2001  RULE	CLASS 424	GROUP ART UNIT 1654	ATTORNEY DOCKET NO. 469443-00004/A- 67279-5/RF
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## APPLICANTS

David A. Horwitz, Santa Monica, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/564,436 05/04/2000 PAT 6,358,506  
which is a CIP of 09/186,771 11/05/1998 PAT 6,228,359  
which claims benefit of 60/064,507 11/05/1997  
and said 09/564,436 05/04/2000  
claims benefit of 60/132,616 05/05/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/02/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	CA	16	26	2
Examiner's Signature	Initials			

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## TITLE

USE OF CYTOKINES AND MITOGENS TO INHIBIT PATHOLOGICAL IMMUNE RESPONSES

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )



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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 16	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
ADDRESS ROBIN M. SILVA FLEHR HOHBACH TEST ALBRITTON & HERBERT LLP Suite 3400 Four Embarcadero Center San Francisco , CA 94111-4187					
TITLE USE OF CYTOKINES AND MITOGENS TO INHIBIT PATHOLOGICAL IMMUNE RESPONSES					
FILING FEE  RECEIVED 827	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: _____		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		